that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARCOS MELO

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: CORAIS INVESTMENTS LLC

2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

Current Principal Place of Business:

5401 S KIRKMAN RD STE 135 ORLANDO, FL 32819

Current Mailing Address:

DOCUMENT# L17000119734

5401 S KIRKMAN RD STE 135 ORLANDO, FL 32819 US

FEI Number: 30-0992338

Name and Address of Current Registered Agent:

US TAX CONSULTING INC 5401 S KIRKMAN RD STE 135 ORLANDO, FL 32819 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Electronic Signature of Registered Agent

SIGNATURE:

	5 5 5		
Authorized Person(s) Detail :			
Title	AMBR	Title	AMBR
Name	MELO, MARCOS	Name	MELO, PAULO
Address	RUA DOS NAVEGANTES 2083 APT 1701	Address	RUA FRANCISCO DA CUNHA 206 APT 1502
City-State-Zip:	RECIFE PE 51020011	City-State-Zip:	RECIFE PE 51020041
Title	AMBR		
Name	COLONNO, MAURICIO		
Address	ALAMEDA DOS GIRASSOIS 386		
City-State-Zip:	SANTANA DE PARNAIBA SP 06539 130		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

AMBR

Certificate of Status Desired: No

FILED Nov 22, 2019 Secretary of State 2454175077CC

> 11/22/2019 Date

Date